

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | JMC | 19 | 4/5/04 |
| O.I.P.E. CLASSIFIER | | 71634 | 4/7/04 |
| FORMALITY REVIEW | | | 6/1/00 |
| RESPONSE FORMALITY REVIEW | | | 11/3/00 |

Best Available Copy

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | 1/12/04 |
| 1 ✓ | 1/12/04 |
| 2 ✓ | 1/12/04 |
| 3 ✓ | 1/12/04 |
| 4 ✓ | 1/12/04 |
| 5 ✓ | 1/12/04 |
| 6 ✓ | 1/12/04 |
| 7 ✓ J | 1/12/04 |
| 8 ✓ J | 1/12/04 |
| 9 ✓ J | 1/12/04 |
| 10 ✓ J | 1/12/04 |
| 11 ✓ J | 1/12/04 |
| 12 ✓ J | 1/12/04 |
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| 14 ✓ J | 1/12/04 |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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